

COMBINED DECLARATION AND POWER OF ATTORNEY

(Original, Design, National Stage of PCT, Supplemental)

As a below named inventor, I hereby declare that:

		TYPE OF DECLARATION					
This declarati	on is of the f	ollowing type: (check one applicable item b	elow)				
	original design supplemental National Stage of PCT divisional (see added page) continuation (see added page) continuation-in-part (see added page)						
INVENTORSHIP IDENTIFICATION							
named invent	or listed belo	ddress and citizenship is as stated below new is the original and first inventor of the sub ton the invention entitled:	ext to my name. I believe that the ext matter which is claimed and				
		TITLE OF INVENTION					
	ROB	OT ARM TYPE AUTOMATIC CAR WASHIN	NG DEVICE				
		SPECIFICATION IDENTIFICATION					
The specificat	tion of which	(complete (a), (b) or (c))					
(a) (b)	□ w □ S	attached hereto. as filed on erial No a cpress Mail No a as amended on	or				
(c)	■ w P P	as described and claimed in PCT Inte <u>CT/JP2004/000329</u> filed on <u>January 16</u> CT Article 19 on	rnational Application No				
(d)	□ a	nended on					
		POWER OF ATTORNEY					
namely, Anth Michael J. E Jay S. Franklii	ony G. M. I Bujold, Reg n, Registratio	eby appoint all of the practitioners associated Davis, Registration No. 27,868, Gary D. C stration No. 32,018, Scott A. Daniels, n No. 54,105, as attorneys and/or agents to r nd Trademark Office (USPTO) in connection	Clapp, Registration No. 29,055, Registration No. 42,462 and represent the undersigned before				
□ Attacl	hed as part of ey(s) to acce	of this Declaration and Power of Attorney is pt and follow instructions from my represer	s the authorization of the above- ntative(s).				
Send Corresp	ondence to:						
Customer No. 020210 Davis & Bujold, P. L. L. C.			alls to: (603) 226-7490				
112 Pleasant Street		Direct Facsimiles to:	(603) 226-7499				

Concord, NH 03301-2931

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ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent Office all information which is known to be material to patentability of this application as defined in § 1.56 of Title 37 of the Code of Federal Regulations.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	PRIORITY UNDER 37	
			□YES	□NO

(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION	

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or inventor Yoshiaki TAKIDA						
Inventor's signature: \signature:	Takida	Date: 2006, 7, 5				
Post Office Address: 6-905 Urban-rafi	e Obata, 1-8, Obata Ota,	Moriyama-ku Nagoya-shi, Aichi				
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Full name of second inventor						
Inventor's signature:	Date:					
Post Office Address:						
Residence:	Country	of Citizenship:				